U. 3. <u></u>	A DOUTERNATE GOT IT.			PURGUAS IAN PERS			·		143	
	T REIMBURSAI	BLE (Department, bureau,	or establishment)				-	PA	ID BY	
Voucher pre	pared at	(0	live place and deta				-			
THE UNITED	STATES, Dr.,		is Account No					6	jet j	
		•						00-03	390.59	
To		(Payee)					-	COPY /	0° Z	
									and the State Stat	
		ARTIC	(City) (State) LES OR SERVICES				UNIT PRICE AMOUN			
No. and Date of Order	f Date of Delivery or Service	(Enter description, item : schedule, and other	umber of contraction deen	t or Federal su led necessary)	pply	QUANTITY	Cost	Per	Dollars	
		Discount Terms	·							
		Costs		-					\$178	
	į									
-										
PAYMENT:	}									
Complete  Partial									<u> </u>	
Final		Use continua	tion sheet(s) if nec	essarv						
Shipped from	1	to Weigh	·	Government B		· !		Total	\$178	
I certify that the	above bill is correc	t and just and that payment he	s not been receive	1	_ :	must NO				
		(Sign original only)			Difference	es				
- 1				]						
Date	759 *Pavee	ired when a like certifica	te is made by payee on atta	shed bill or bills)					₹17£	
Per		Title				t verified; cure or initia				
Contract No.	H-101	Date	Req. No.		Da			nvoice Rec'		
Pursuant to auth	ority vested in me,	I certify that this account is con	rect and proper fo	r payment.						
† Approved for \$		******	†(Autho				rized Certifying Officer)			
Ву			SIGN ORIGINAL Title				•			
Бу	,	222222222222222222222222222222222222222	ONLY	litle						
Title				Date						
	THE REVERSE OF TH	IIS FORM MUST BE EXECUTED WHEN P	URCHASES ARE MADE	OR SERVICES SECUE	RED WITHOU	T WRITTEN AC	Greement i	N ANY FORM		
	ACCOU	NTING CLASSIFICATION (Ap	propriation Symb	ol must be sho	wn: other	classificati	on option	al)		